

NECK NODES ULTRASOUND

PATIENT NAME: _____ MR#: _____
DATE: _____ TECH: _____ EXT#: _____
FACILITY: MWH / MIF / ICW / MILH / MINS / MIKG / MIHC / MIEM / SH

INDICATION: ☐ Abnormal physical exam of neck ☐ Abnormal radiological finding ☐ Lymphadenopathy
☐ History of thyroid cancer ☐ Follow up thyroidectomy ☐ Hyperparathyroidism ☐ Parathyroid adenoma
☐ Other: _____

COMPARISON: ☐ NONE ☐ _____

TECHNIQUE: Grayscale and color duplex sonography of the neck performed. ☐ Imaging of the parathyroid regions was performed as well.

FINDINGS:

RIGHT LEVEL II NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

RIGHT LEVEL III NODES:

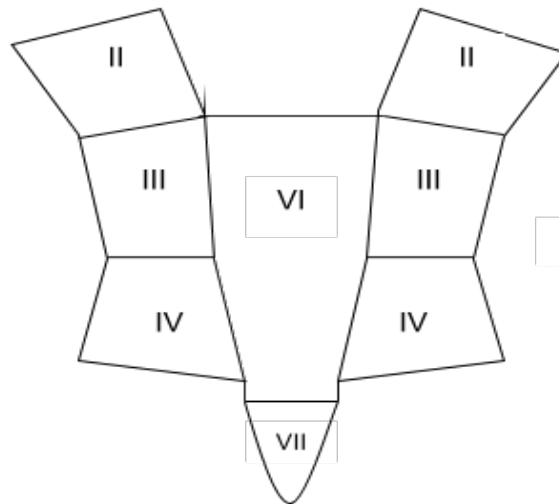
LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

RIGHT LEVEL IV NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

RIGHT LEVEL VI NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____



LEVEL VII NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

LEFT LEVEL II NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

LEFT LEVEL III NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

LEFT LEVEL IV NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

LEFT LEVEL VI NODES:

LONG x WIDE x AP	IMG #
1. _____ x _____ x _____ cm	_____
2. _____ x _____ x _____ cm	_____
3. _____ x _____ x _____ cm	_____

☐ No abnormal soft tissue identified in the thyroid bed to suggest residual/recurrent malignancy.

IMPRESSION: Preliminary findings/impression subject to radiologist review.